



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 9411

|                                    |   |                     |                                     |   |
|------------------------------------|---|---------------------|-------------------------------------|---|
| <b>SERIAL NUMBER</b><br>09/955,174 | <b>FILING DATE</b><br>09/19/2001<br><b>RULE</b> | <b>CLASS</b><br>514 | <b>GROUP ART UNIT</b><br>1614 / 635 | <b>ATTORNEY DOCKET NO.</b><br>PH114205.2402/KMZ15101.02 |
|------------------------------------|---|---------------------|-------------------------------------|---|

## APPLICANTS

William G. Kerr, Tampa, FL

## \*\* CONTINUING DATA \*\*\*\*\*

THIS APPLN CLAIMS BENEFIT OF 60/233,661 09/19/2000  
AND CLAIMS BENEFIT OF 60/314,099 08/23/2001

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 10/17/2001

|   |                               |                             |                           |                                |
|---|-------------------------------|-----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | <b>STATE OR COUNTRY</b><br>FL | <b>SHEETS DRAWING</b><br>10 | <b>TOTAL CLAIMS</b><br>37 | <b>INDEPENDENT CLAIMS</b><br>7 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                               |                             |                           |                                |
| Verified and Acknowledged<br>Examiner's Signature: [Signature] Initials: [Initials]   |                               |                             |                           |                                |

## ADDRESS

27160

## TITLE

Control of NK cell function and survival by modulation of SHIP activity

|                                    |   |   |
|------------------------------------|---|---|
| <b>FILING FEE RECEIVED</b><br>1466 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|------------------------------------|---|---|